

SERIAL NUMBER 09/227,398	FILING DATE 01/08/99	CLASS 370	GROUP ART UNIT 2732	ATTORNEY DOCKET NO. CISCP077
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APPLICANT

KENT K. LEUNG, MOUNTAIN VIEW, CA.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*  
VERIFIED

N. M. none

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*  
VERIFIED

none N. M.

\*\*FOREIGN APPLICATIONS\*\*\*\*\*  
VERIFIED

none N. M.

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 02/02/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 5	TOTAL CLAIMS 40	INDEPENDENT CLAIMS 6
Verified and Acknowledged <u>Examiner's Initials</u> <u>Initials</u>					

ADDRESS

ELISE R HEILBRUNN  
BEYER & WEAVER  
P O BOX 61059  
PALO ALTO CA 94306

TITLE

MOBILE IP ACCOUNTING

FILING FEE RECEIVED  \$1,354	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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SERIAL NUMBER 09/227,398	FILING DATE 01/08/99	CLASS 370	GROUP ART UNIT 2731	ATTORNEY DOCKET NO. CISC077
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APPLICANT

KENT K. LEUNG, MOUNTAIN VIEW, CA.

2682

**\*\*CONTINUING DOMESTIC DATA\*\*\*\*\***  
VERIFIED

none N.M

**\*\*371 (NAT'L STAGE) DATA\*\*\*\*\***  
VERIFIED

none N.M

**\*\*FOREIGN APPLICATIONS\*\*\*\*\***  
VERIFIED

none N.M

FOREIGN FILING LICENSE GRANTED 02/02/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 5	TOTAL CLAIMS 43	INDEPENDENT CLAIMS 6
Verified and Acknowledged		Examiner's Initials	Initials		

ADDRESS	ELISE R HEILBRUNN BEYER & WEAVER P O BOX 61059 PALO ALTO CA 94306	Customer No. 22434
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TITLE	MOBILE IP ACCOUNTING
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FILING FEE RECEIVED  \$1,354	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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